

**Town of Moncks Corner
Farmers' Market**

2017 Vendor Application

Office Use Only

Space # : _____

Payment Type:

Full _____ Weekly _____ Seasonal _____

Payment Method:

Cash _____ Check _____ MO _____

CK/MO#: _____

Date: _____ Initials: _____

Business/Farm Name: _____

Applicant's Name: _____

Website: _____ Phone: _____

Email Address: _____

Address: _____

City: _____ State: _____ Zip: _____

Circle Vendor/Exhibitor Type:

Farmer

Baker

Food Processor

Artist

Musician

Civic Association

Please provide any preferences for booth location below:

Forms of Payment (Circle All that Apply):

Debit

Credit

EBT/SNAP

WIC (FMNP/SFMNP)

Please Circle Dates Requested:

Entire Season	Summer Only	Fall Only
April 6 – Dec. 14	April 6 – Aug. 31	Sept. 7 – Dec. 14
Specific Dates:		

Please list the items that you will be selling:

I am applying for vendor space in the 2017 Town of Moncks Corner Farmers' Market. By signing below, I agree to follow the Town of Moncks Corner Farmers' Market Vendor Standard Operating Guidelines as well as applicable local, state, and federal requirements. I have been provided a copy of the Town of Moncks Corner Farmers' Market 2016 Vendor Standard Operating Guidelines and Appendices, and I expressly agree to abide by all provisions contained therein.

Signature: _____ Date: _____

Applications may be submitted in person or mailed to:

Sara Anderson, Special Events Coordinator

PO Box 700, 118 Carolina Avenue, Moncks Corner, SC 29461

Phone: 843.899.4708; Fax: 843.719.7902

mcdepot@twm-mc.com

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